E: 11	in this into					
		rmation to identify your				
Det	otor 1	Brandi Monique I First Name	Daniels Middle Name	Last Name		
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States B	Bankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
		17-52679			- 0	w.u
(II KI	nown)				_	if this is an ded filing
		orm 106Sum	and Liabilities an	d Contain Statistical Information		
				d Certain Statistical Information are filing together, both are equally responsible for		12/15
info	rmation. Fil r original fo	II out all of your schedul	es first; then complete th	e information on this form. If you are filing amend the box at the top of this page.	ded schedu	les after you file
					Your as	ssets f what you own
1.		A/B: Property (Official Foliation ine 55, Total real estate, f			\$	97,380.00
	1b. Copy I	line 62, Total personal pro	perty, from Schedule A/B		\$	14,532.00
	1c. Copy l	ine 63, Total of all propert	y on Schedule A/B		\$	111,912.00
Par	t 2: Sum	marize Your Liabilities				
						abilities t you owe
2.			laims Secured by Property mn A, Amount of claim, at t	(Official Form 106D) the bottom of the last page of Part 1 of Schedule D	\$	15,798.00
3.			Unsecured Claims (Official 1 (priority unsecured claim	Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Сору	the total claims from Part	2 (nonpriority unsecured cl	aims) from line 6j of Schedule E/F	\$	78,622.00
				Your total liabilities	\$	94,420.00
Par	t 3: Sum	marize Your Income and	Expenses			
4.		I: Your Income (Official For combined monthly incom		I	\$	2,312.17
5.	Schedule Copy your	J: Your Expenses (Official monthly expenses from li	Form 106J) ne 22c of <i>Schedule J</i>		\$	1,647.17
Par	t 4: Answ	wer These Questions for	Administrative and Stati	stical Records		
6.	-		er Chapters 7, 11, or 13? on this part of the form. Cl	neck this box and submit this form to the court with yo	our other sch	nedules.

7. What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Best Case Bankruptcy

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____3,022.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	56,309.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	56,309.00

							_		
Filli	in this inform	nation to identify	your case and th	is filin	g:				
Deb	tor 1	Brandi Moni	que Daniels						
		First Name	<u> </u>	Name	Last Name				
	tor 2 use, if filing)	First Name	Middle	Name	Last Name				
		nkruptcy Court for	the: NORTHER	N DIST	RICT OF OHIO				
Offic	eu States Dai	ikiupicy Court for	tile. NONTILIN	IN DIGI	NICT OF OTHO				
Cas	e number 1	7-52679							Check if this is an
									amended filing
Off	icial For	rm 106A/B	}						
Sc	hedule	e A/B: Pr	operty						12/15
				an asse	t only once. If an asset fits in more than one	category, lis	st the asset in	the c	
Answ Part	1: Describe E	ion. Each Residence, Bu	uilding, Land, or Ot	her Rea	his form. On the top of any additional pages I Estate You Own or Have an Interest In Jence, building, land, or similar property?				
_		, , ,		•	3, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2,				
	No. Go to Part	2.							
1.1	Yes. Where is	and proporty.		Wha	t is the property? Check all that apply				
	322 Trigon	ia Drive			Single-family home	Do not ded	luct secured cla	aims (or exemptions. Put
	Street address, if	f available, or other des	cription		Duplex or multi-unit building Condominium or cooperative				ms on Schedule D: ecured by Property.
				_	Manufactured or mobile home				
	Akron	ОН	44302-0000			Current va			rrent value of the rtion you own?
	City	State	ZIP Code				50,490.00	ро	\$50,490.00
									ownership interest
					Other	(such as fe	ee simple, ten		by the entireties, or
				Who	has an interest in the property? Check one		te), if known. S sole own	٥,	
	Cummit			_	Debtor 1 only	Deptor i	s sole own	er	
	Summit				Debtor 2 only				
	County						k if this is com	mun	ity property
						`	structions)		
					r information you wish to add about this iter erty identification number:	n, such as ic	ocai		
				Lier	-				
				1)S	ummit County Fiscal Officer \$1,56				
					/ based upon Summit County Tax		\$50,490		

Deb	tor 1 Brandi I	Monique D	aniels			Case number	er (if known) 17-	-52679	
	If you own or I	have more	than one, list h	ere:					
1.2	,				t is the property? Check all that apply				
	1306 Crestviev	w Avenue			Single-family home	Do no	ot deduct secured o	laims or exemptions. Put	
	Street address, if available, or other description				Duplex or multi-unit building			ed claims on Schedule D:	
				П	Condominium or cooperative	Crear	lors who have Cia	ims Secured by Property.	
					Manufactured or mobile home	Curre	ent value of the	Current value of the	
	Akron	ОН	44320-0000		Land		e property?	portion you own?	
	City	State	ZIP Code		Investment property		\$93,780.00	\$46,890.00	
					Timeshare	Desc	ribe the nature of	your ownership interest	
					Other	(such	n as fee simple, te	nancy by the entireties, or	
				_	has an interest in the property? Check	One	estate), if known.		
				ᆸ	Debtor 1 only	Deb	tor owns joint	ly with father	
	Summit				Debtor 2 only				
	County				Debtor 1 and Debtor 2 only	_ (Chack if this is as	mmunity property	
					At least one of the debtors and another		see instructions)	mmunity property	
				Othe	r information you wish to add about th	his item, such	as local		
				prop	erty identification number:				
				Lier	n:				
				1) 5	Summit County Fiscal Office	\$775			
				•	her resides				
				FM\	/ based upon Summit County	Tax Valuat	tion		
				To r	etain				
	1344 8th Aven Street address, if availa		scription	■	Single-family home Duplex or multi-unit building	the ar	mount of any secur	elaims or exemptions. Put ed claims on Schedule D:	
					Condominium or cooperative	Creai	tors who Have Cla	ims Secured by Property.	
					Manufactured or mobile home	Curre	ent value of the	Current value of the	
	Akron	ОН	44306-0000		Land		e property?	portion you own?	
	City	State	ZIP Code		Investment property		\$0.00	\$0.00	
					Timeshare	Desc	ribe the nature of	your ownership interest	
					Other	(such	n as fee simple, te	nancy by the entireties, or	
				Who	has an interest in the property? Check	One	estate), if known.		
				_			tor owns joint ite of Delores	ly with father and	
	0			_	Debtor 1 only		le oi Deloies	vvaru	
	Summit				200.0. 2 0)				
	County			ᆜ		п (Check if this is co	mmunity property	
					At least one of the debtors and another	er 🗀 🤃	see instructions)		
					r information you wish to add about th	his item, such	as local		
					erty identification number:				
				Liie		A.			
					Summit County Fiscal Officer	\$5,181			
				•	Noodcove III \$5,173 / based upon client's valuatio	'n			
					tor has received letter from C		n indicating re	esidence needs	
					e demolished.	, 0. 7 0			
				To k	pe surrendered				
					your entries from Part 1, including			¢07 200 00	
	pages you have a	attached for	Part 1. Write that	numbe	r here			\$97,380.00	
Part	2: Describe Your	Vehicles							
			or equitable inter	est in a	ny vehicles, whether they are req	istered or no	ot? Include anv	vehicles you own that	

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Schedule A/B: Property

page 2

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Official Form 106A/B

Debt	or 1 Brandi Monique Daniels	C	ase number (if known) 17-	52679
3. C a	ars, vans, trucks, tractors, sport utility ve	ehicles, motorcycles		
П	No			
	Yes			
	103			
3.1	Make: Kia	Who has an interest in the property? Check one		laims or exemptions. Put
	Model: Forte	■ Debtor 1 only		ed claims on Schedule D: ims Secured by Property.
	Year: 2012	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage: 133000	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	\square At least one of the debtors and another		
	Lien: Santander \$8,107 (\$349 /		\$5,350.00	\$5,350.00
	month) Retain and pay	Check if this is community property (see instructions)		Ψ0,000.00
	FMV \$5,350 based upon NADA			
	Clean Retail value			
5 A .pa				\$5,350.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
E	xamples: Major appliances, furniture, linens No Yes. Describe			
	excess of \$575	ds and furnishings. No single item has a .	value in	\$2,720.00
E	including cell phones, cameras, r l No l Yes. Describe Television(s), V	leo, stereo, and digital equipment; computers, printenedia players, games /CR(s), computer(s),cell phone(s) ect No e in excess of \$575.		ions; electronic devices
	Litetti ilas a valu	G III GAUGSS UI 43/3.		Ψ000.00
E	pollectibles of value xamples: Antiques and figurines; paintings, other collections, memorabilia, co No Yes. Describe	prints, or other artwork; books, pictures, or other a bllectibles	't objects; stamp, coin, or ba	aseball card collections;
E	musical instruments	nd other hobby equipment; bicycles, pool tables, go	olf clubs, skis; canoes and ka	ayaks; carpentry tools;
L	Yes. Describe			
Officia	al Form 106A/B	Schedule A/B: Property		page 3

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De	ebtor 1	Brandi Moni	que Dar	iels			Case number (if known)	17-52679
	■ No	ms ples: Pistols, rifles Describe	s, shotgur	ns, ammunition,	and related	l equipment		
	□ No		othes, furs	s, leather coats,	, designer w	rear, shoes, accessories		
			Clothi	ng - misc				\$100.00
	□ No		welry, cos	stume jewelry, er	engagement	rings, wedding rings, heirloon	n jewelry, watches, gems, (gold, silver
			Jewelr	y - misc				\$50.00
	Exam _l ■ No	arm animals ples: Dogs, cats,	birds, hor	ses				
	■ No	ther personal and		-	did not alre	eady list, including any heal	th aids you did not list	
15						ncluding any entries for pag	es you have attached	\$3,220.00
		escribe Your Finan wn or have any l			st in any of	the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No	ples: Money you l		•		a safe deposit box, and on ha	nd when you file your petiti	on
							Cash on hand	\$100.00
	Exam _l □ No				ounts with th	ertificates of deposit; shares in e same institution, list each.	n credit unions, brokerage	houses, and other similar
			17.1.	Checking	(Chase Bank		\$450.00
			17.2.	Checking		Chase Bank Joint account with mothe	er.	\$300.00
			17.3.	Checking		Chase Bank Custodial account fo mir	nor	\$0.00

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Official Form 106A/B

Best Case Bankruptcy

page 4

Schedule A/B: Property

De	ebtor 1	Brandi Mo	onique Daniels		Case number (if known)	17-52679
18.			ls, or publicly traded stocks ds, investment accounts with b	brokerage firms, money market accou	ınts	
	■ No □ Yes		Institution or issue	er name:		
10			l stock and interests in incor	rporated and unincorporated busing	assas including an interes	t in an LLC nartnershin and
13.	•	enture	stock and interests in incor	porated and unincorporated busine	esses, including an interes	t iii ali EEO, partilersiiip, aliu
	☐ Yes.	Give specific	information about them Name of entity:		% of ownership:	
20.	Negoti Non-ne	iable instrume	nts include personal checks, c	gotiable and non-negotiable instrur cashiers' checks, promissory notes, ar transfer to someone by signing or deli	nd money orders.	
	■ No □ Yes.	Give specific	information about them Issuer name:			
			ion accounts in IRA, ERISA, Keogh, 401(k),	, 403(b), thrift savings accounts, or otl	her pension or profit-sharing	plans
	■ Yes.	List each acco	ount separately. Type of account:	Institution name:		
			401k	Third Federal Savings a	and Loan	\$5,112.00
	Examp ■ No			so that you may continue service or unit, public utilities (electric, gas, water), Institution name or individua	telecommunications compan	ies, or others
			ct for a periodic payment of mo	Institution name or individua		
	■ No □ Yes		Issuer name and description.			
	Interest	ts in an educ	ation IRA, in an account in a	qualified ABLE program, or under	a qualified state tuition pro	gram.
	■ No	C. §§ 530(b)(1	1), 529A(b), and 529(b)(1).			
	☐ Yes		Institution name and descripti	ion. Separately file the records of any	interests.11 U.S.C. § 521(c):	
	■ No			(other than anything listed in line 1), and rights or powers exe	rcisable for your benefit
	☐ Yes.	Give specific	information about them			
26.	Examp			and other intellectual property eeds from royalties and licensing agre	eements	
	■ No □ Yes.	Give specific	information about them			
27.			es, and other general intangik permits, exclusive licenses, co	bles operative association holdings, liquor	licenses, professional license	es
		Give specific	information about them			
M	oney or	property owe	ed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.

Debtor 1	Brandi Monique Daniels		Case number (if known	n) 17-52679
28. Tax re	efunds owed to you			
■ Yes	. Give specific information about th	em, including whether you already	filed the returns and the tax years	
		2017 Federal and State Tax Portions of the 2016 Fed Refund, if any, attributable to earned in and/or additional child tax care being claimed as 100% Portions of the tax refun not attributable to earne and/or child tax credits subject to to other exemptions wh be determined	deral Tax ncome credit e credit are exempt. nd for 2015 ed income may be	\$0.00
Exam ■ No	y support nples: Past due or lump sum alimon . Give specific information	ıy, spousal support, child support, n	naintenance, divorce settlement, proper	rty settlement
Exam	amounts someone owes you nples: Unpaid wages, disability insu benefits; unpaid loans you m . Give specific information	rance payments, disability benefits, ade to someone else	, sick pay, vacation pay, workers' comp	pensation, Social Security
	ests in insurance policies	ance: health savings account (HSA	.); credit, homeowner's, or renter's insur	rance
□ No	. Name the insurance company of o Company n	each policy and list its value.	Beneficiary:	Surrender or refund value:
		leral Savings and Loan e group term life insurance		\$0.00
If you some	nterest in property that is due you are the beneficiary of a living trust one has died. . Give specific information		nce policy, or are currently entitled to re	eceive property because
Exam ■ No	nples: Accidents, employment dispu	or not you have filed a lawsuit or ttes, insurance claims, or rights to s		
	. Describe each claim			
■ No	contingent and unliquidated cla . Describe each claim	ims of every nature, including co	ounterclaims of the debtor and rights	to set off claims
■ No	inancial assets you did not alread . Give specific information	dy list		

Debt	tor 1	Brandi Monique Daniels		Case number (if known)	17-52679
36.		the dollar value of all of your entries from Part 4, including art 4. Write that number here		jes you have attached	\$5,962.00
Part	5: De	scribe Any Business-Related Property You Own or Have an Intere	est In. List any real esta	ate in Part 1.	
37. D	o you	own or have any legal or equitable interest in any business-relate	ed property?		
	No. Go	o to Part 6.			
	Yes. (Go to line 38.			
Part		escribe Any Farm- and Commercial Fishing-Related Property You you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. C	ο γοι	u own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	■ No.	Go to Part 7.			
	☐ Yes	s. Go to line 47.			
Part '	7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
	Exam _l I No	u have other property of any kind you did not already list? ples: Season tickets, country club membership Give specific information	•		
54.	Add 1	the dollar value of all of your entries from Part 7. Write that	at number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part '	1: Total real estate, line 2			\$97,380.00
56.	Part 2	2: Total vehicles, line 5	\$5,350.00		
57.	Part 3	3: Total personal and household items, line 15	\$3,220.00		
58.	Part 4	4: Total financial assets, line 36	\$5,962.00		
59.	Part 5	5: Total business-related property, line 45	\$0.00		
60.	Part (6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	7: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$14,532.00	Copy personal property to	otal \$14,532.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$111,912.00
				Ļ	

Fill in this infor	mation to identify your	case:		
Debtor 1				
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
_	17-52679			
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as E	xempt							
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	☐ You are claiming federal exemptions. 11 L	J.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.					
	322 Trigonia Drive Akron, OH 44302 Summit County	\$50,490.00		\$48,923.17	Ohio Rev. Code Ann. § 2329.66(A)(1)				
	Liens: 1)Summit County Fiscal Officer \$1,566 FMV based upon Summit County Tax Valuation \$50,490 Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	2323.00(A)(1)				
	1306 Crestview Avenue Akron, OH	\$46,890.00		\$1,250.00	Ohio Rev. Code Ann. §				
	44320 Summit County Lien: 1) Summit County Fiscal Office \$775 Mother resides FMV based upon Summit County Tax Valuation To retain Line from Schedule A/B: 1.2			100% of fair market value, up to any applicable statutory limit	2329.66(A)(18)				
	Household goods and furnishings. No single item has a value in excess	\$2,720.00		\$2,720.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)				
	of \$575.			100% of fair market value, up to any applicable statutory limit					

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Debto	Brandi Monique Daniels			Case number (if known)	17-52679	
	rief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	elevision(s), VCR(s), omputer(s),cell phone(s) ect No	\$350.00		\$350.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
si \$	ingle item has a value in excess of 575. ne from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	2329.00(A)(4)(a)	
Clothing - misc Line from Schedule A/B: 11.1		\$100.00		\$100.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
LI	ne nom <i>Schedule A/B</i> . 11.1			100% of fair market value, up to any applicable statutory limit	2329.00(A)(4)(a)	
	ewelry - misc ne from <i>Schedule A/B</i> : 12.1	\$50.00		\$50.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)	
	THE HOLLI SCHEUULE AV.D. 12.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(4)(D)	
	ash on hand ne from <i>Schedule A/B</i> : 16.1	\$100.00		\$100.00	Ohio Rev. Code Ann. § 2329.66(A)(3)	
	THE HOLLI GENERALIE AND LEGISLA			100% of fair market value, up to any applicable statutory limit	2020:00(/ 1)(0)	
	01k: Third Federal Savings and oan	\$5,112.00		100%	11 U.S.C. § 522(b)(3)(C)	
_	ne from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit		
	017 Federal and State Tax Refunds ortions of the 2016 Federal Tax	\$0.00		100%	Ohio Rev. Code Ann. §2329.66(A)(9)(g)	
R at	efund, if any, ttributable to earned income credit			100% of fair market value, up to any applicable statutory limit	32020:00(:1)(0)(9)	
ac be P	dditional child tax care credit are eing claimed as 100% exempt. ortions of the tax refund for 2015 ot attributable ne from Schedule A/B: 28.1					
	re you claiming a homestead exemption Subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property covered No	3 years after that for ca	ises fi	,	,	
	☐ Yes					

Official Form 106C

Fill in this inform	nation to identify you	ır case:			
Debtor 1	Brandi Monique			-	
Dahrano	First Name	Middle Name Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name		-	
United States Box	almuntou Count for the	NORTHERN DISTRICT OF OHIO			
United States bar	nkruptcy Court for the	NORTHERN DISTRICT OF ONIO		-	
Case number 1	17-52679				
(if known)				☐ Check	if this is an
				ameno	ded filing
Official Form	106D				
		M/le e I I e e e Ol e le e e C e e e e e	D		
Schedule	D: Creditors	Who Have Claims Secure	a by Propert	У	12/15
Be as complete and	l accurate as possible.	If two married people are filing together, both are e	qually responsible for su	upplying correct informa	tion. If more space
is needed, copy the number (if known).	Additional Page, fill it	out, number the entries, and attach it to this form.	On the top of any additio	nal pages, write your na	me and case
, ,	have claims secured b	v vour property?			
		his form to the court with your other schedules.	You have nothing else t	o report on this form.	
_	all of the information	•	. ou navo noug c.co		
		Delow.			
	I Secured Claims		. Column A	Column B	Column C
		more than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
		ical order according to the creditor's name.	Do not deduct the	that supports this	portion
Santander	r Consumer		value of collateral.	claim	If any
Usa Usa		Describe the property that secures the claim:	\$8,107.00	\$5,350.00	\$2,757.00
Creditor's Name	9	2012 Kia Forte 133000 miles			
		Lien: Santander \$8,107.20 (\$349.01			
		/ month) Retain and pay			
		FMV \$5,350 based upon NADA			
		Clean Retail value			
Po Box 96	61245	As of the date you file, the claim is: Check all that apply.			
Ft Worth,	TX 76161	Contingent			
Number, Street,	, City, State & Zip Code	☐ Unliquidated			
		Disputed			
Who owes the de	bt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only		An agreement you made (such as mortgage or second car loan)	ecured		
Debtor 2 only	.h 0	<u>_</u>			
Debtor 1 and De	ector 2 only ne debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
☐ Check if this cla		☐ Other (including a right to offset)			
community del					
	Opened				
	08/11 Last				
	Active	4000			
Date debt was incu	urred 9/28/17	Last 4 digits of account number 1000			
2.2 Summit C	ounty Fiscal	Describe the property that secures the claim:	\$1,566.00	\$50,490.00	\$0.00
Creditor's Name	9	322 Trigonia Drive Akron, OH 44302			
		Summit County			
		Liens:			
		1)Summit County Fiscal Officer			
		\$1,566 FMV based upon Summit County			
		Tax Valuation \$50,490			
175 S. Mai	in Street #320	As of the date you file, the claim is: Check all that			

Akron, OH 44308

Official Form 106D

Contingent

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 3

Debtor 1	Brandi Monique Daniels	;	Case number (if know)	17-52679	
	First Name Middle Na	ame Last Name			
Num	ber, Street, City, State & Zip Code	☐ Unliquidated			
	,,,,	☐ Disputed			
Who owe	es the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor	1 only	☐ An agreement you made (such as mortgage or sec	ured		
☐ Debtor	2 only	car loan)			
☐ Debtor	r 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
☐ At leas	st one of the debtors and another	☐ Judgment lien from a lawsuit			
	if this claim relates to a nunity debt	Other (including a right to offset)			
	was incurred	Last 4 digits of account number			
	mmit County Fiscal	Book the discount of the control of the	\$775.00	\$93,780.00	\$0.00
	ficer ditor's Name	Describe the property that secures the claim: 1306 Crestview Avenue Akron, OH	Ψ113.00	Ψ33,100.00	ψ0.00
0.00	and o Hamo	44320 Summit County			
		Lien:			
		1) Summit County Fiscal Office			
		\$775			
		Mother resides FMV based upon Summit County			
		Tax Valuation			
		To retain			
17	5 S. Main Street #320	As of the date you file, the claim is: Check all that			
Ak	ron, OH 44308	apply. Contingent			
Num	nber, Street, City, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who owe	es the debt? Check one.	Nature of lien. Check all that apply.			
Debtor	1 only	An agreement you made (such as mortgage or sec car loan)	ured		
Debtor	-	<u> </u>			
	r 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
_	st one of the debtors and another	☐ Judgment lien from a lawsuit			
	tif this claim relates to a nunity debt	Other (including a right to offset)			
Date debt	was incurred	Last 4 digits of account number			
2.4 W o	oodcove III LLC	Describe the property that secures the claim:	\$5,350.00	\$0.00	\$5,350.00
Cred	ditor's Name	1344 8th Avenue Akron, OH 44306			
		Summit County Liiens:			
		1) Summit County Fiscal Officer			
		\$5,181			
		2) Woodcove III \$5,173			
		FMV based upon client's valuation.			
		Debtor has received letter from City of Akron indicating residence needs			
		to be			
PO	Box 7055	As of the date you file, the claim is: Check all that			
	verly Hills, CA 90212	apply. Contingent			
	nber, Street, City, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who owe	es the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor	1 only	☐ An agreement you made (such as mortgage or sec	ured		
☐ Debtor	2 only	car loan)			
☐ Debtor	r 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
☐ At leas	st one of the debtors and another	☐ Judgment lien from a lawsuit			

Official Form 106D Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 3

Debtor 1 Brandi Monique		di Monique Daniels		Case number (if know)	17-52679	
	First Name	Middle Name	Last Name			
	if this claim relates to a nunity debt	Other (inc	cluding a right to offset)			
Date debt was incurred Last 4 digits of account number		4 digits of account number				
				445 700		
	•		nis page. Write that number her	e: \$15,798.	.00	
	If this is the last page of your form, add the dollar value totals from all pages Write that number here:		ue totals from all pages.	\$15,798.	.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 3 of 3

Debtor 1 Brandi Monique Daniels First Name							
Debtor 2 (Spouse #, Ring) Feet Name	Fill in th	nis information to identify y	our case:				
Pies Name	Debtor 1	Brandi Monio	ue Daniels				
United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO Case number 17-52679 (If thrown)		<u> </u>		;	Last Name	-	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO Case number 17-52679						_	
Case number 17-52679 Check if this is an amended filing	(Spouse if,	filing) First Name	Middle Nam	i	Last Name		
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with MONPRIORITY claims. List the other party to Schedule C: Executory Continents and Unsequent Claims Secured Claims Schedule C: Executory Continents and Unsequent Claims Secured Claims Schedule C: Executory Continents and Unsequent Claims Secured Claims S	United S	States Bankruptcy Court for the	ne: NORTHERN [ISTRICT OF	OHIO	_	
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with MONPRIORITY claims. List the other party to Schedule C: Executory Continents and Unsequent Claims Secured Claims Schedule C: Executory Continents and Unsequent Claims Secured Claims Schedule C: Executory Continents and Unsequent Claims Secured Claims S	Casa nu	umbor 17 52670					
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to my executory contracts or inexpired leases that could result in a claim. Also list executory contracts on Schedule AB: Property (Official Form 106AB) and on supplemental party of the contracts on Schedule AB: Property (Official Form 106AB) and on Schedule D: Creditors With Place I and I acknowledge to the contract of the contracts on Schedule AB: Property (Official Form 106AB) and on Schedule D: Creditors With Place I acknowledge to the spage. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Part 2: List All of Your NONPRIORITY Unsecured Claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor shape included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2: 4.1 Ace Cash Express Last 4 digits of account number Nonpriority Creditor's Name 1231 Greenway Drive Suite 700 Inving. TX 75038 Number Street City Sinte Zip Code Who incurred the debr? Check one. Poebtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 on and another Check if this claim is for a community debt Student to anseption profits charing plans, and other similar debts		17-32079				п	Check if this is an
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to may executory contracts or unscripted leases that could result in a claim. Also list executory contracts on Schedule AB: Property (Official Form 1060), Do not include any creditors with partialty secured claims that are listed in Schedule Contracts and Unexpired Leases (Official Form 1060). Do not include any creditors with partialty secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property, If more space is needed, copy the Part you need, fill it out, number the entries in the bose on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. 9 to part 2: List All of Your NonPRIORITY Unsecured Claims 2. Do any creditors have nonpriority unsecured claims against you? No. 9 to part 2 control of the control of the count with your other schedules. 2. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims that one of the debtor and nonther unsecured claims. State Zip Code Who incurred the debt? Check one. 4. Ace Cash Express Nonpriority Creditor's Name 1231 Greenway Dirive Suite 700 Debtor 1 and Debtor 2 only Uniquidated Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 priority claims arising out of a separation agreement or di						_	
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to may executory contracts or unscripted leases that could result in a claim. Also list executory contracts on Schedule AB: Property (Official Form 1060), Do not include any creditors with partialty secured claims that are listed in Schedule Contracts and Unexpired Leases (Official Form 1060). Do not include any creditors with partialty secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property, If more space is needed, copy the Part you need, fill it out, number the entries in the bose on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. 9 to part 2: List All of Your NonPRIORITY Unsecured Claims 2. Do any creditors have nonpriority unsecured claims against you? No. 9 to part 2 control of the control of the count with your other schedules. 2. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims that one of the debtor and nonther unsecured claims. State Zip Code Who incurred the debt? Check one. 4. Ace Cash Express Nonpriority Creditor's Name 1231 Greenway Dirive Suite 700 Debtor 1 and Debtor 2 only Uniquidated Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 priority claims arising out of a separation agreement or di	O. (; ;	LE 400E/E					
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts or Schedule AB: Property (Official Form 1966) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 1966). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who have claims Secured by Property. If more space is needed, copy the Part you need, fill tout, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1.1 more than one creditor holds a particular claim, list the other creditors in Part 3.1f you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Ace Cash Express Nonpriority Creditor's Name 1231 Greenway Drive When was the debt incurred? When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt ro and pert of the debtors and another Check of the debtors and another Check of the debtors and another Check if this claim is				•			40445
any executory contracts or unexpired leases that could result in a claim. Also list executory contracts or Schedule Affi. Executory Contracts and Unexpired Leases (Official Form 1966, Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the fet. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. Part 2: List All of Your NONPRIORITY Unsecured Claims 1. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. You provide the control of the claim is control of the creditor who holds each claim. Is a creditor has more than one nonpriority unsecured claims fill out the Continuation Page of Part 2. Last 4 digits of account number Ace Cash Express Number Street Cliy State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only At least one of the debtors and another Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 on first 7 Debtor 6 on first 7 Debtor 6 on first 7 Debtor 6 on first 7							
No. Go to Part 2.	Schedule Schedule left. Attac name and	G: Executory Contracts and U D: Creditors Who Have Claims h the Continuation Page to this I case number (if known).	nexpired Leases (Offic s Secured by Property. s page. If you have no	ial Form 106G If more space information to	G). Do not include any creditors with parti e is needed, copy the Part you need, fill it	ally secured claims out, number the en	s that are listed in atries in the boxes on the
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List All of Your NONPRIORITY Unsecured Claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes.	■ N	lo. Go to Part 2.					
3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes.		 -					
No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes.							
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unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.lf you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Ace Cash Express	■ Y	es.					
Ace Cash Express Nonpriority Creditor's Name 1231 Greenway Drive Suite 700 Irving, TX 75038 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No As 4 digits of account number When was the debt incurred? When was the debt incurred? As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Contingent Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	unse than	cured claim, list the creditor sepa one creditor holds a particular cla	arately for each claim. For	r each claim lis	sted, identify what type of claim it is. Do not l	list claims already inc	cluded in Part 1. If more
Nonpriority Creditor's Name 1231 Greenway Drive Suite 700 Irving, TX 75038 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No When was the debt incurred? When was the debt incurred? As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Type of NOPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts							Total claim
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Suite 700 Irving, TX 75038 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts			14	han was the d	dobt inquerod?		
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Who incurred the debt? Check one. □ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt ls the claim subject to offset? □ Disputed □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts							
□ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts				of the date y	you file, the claim is: Check all that apply		
□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		_					
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts				_			
☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Check if this claim is for a community debt ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ No ☐ Debts to pension or profit-sharing plans, and other similar debts		_		_			
□ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts			_				
debt Is the claim subject to offset? No Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts							
Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts			community				
■ No □ Debts to pension or profit-sharing plans, and other similar debts						rce that you did not	
		_				r debts	
				-	- · · · · · · · · · · · · · · · · · · ·		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 11

ADT Security Systems	Last 4 digits of account number	9402	\$271.0
Nonpriority Creditor's Name c/o Tate & Kirlin Assoc 580 Middletown Blvd Ste Langhorne, PA 19047	ate & Kirlin Assoc When was the debt incurred? Opened 07/17 Middletown Blvd Ste		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	■ Other Specify Home secu		
0		F0F7	
Capital One Nonpriority Creditor's Name	Last 4 digits of account number		\$41
15000 Capital One Dr Richmond, VA 23238	When was the debt incurred?	Opened 06/15 Last Active 9/22/17	
Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other Specify Credit Card		
Conital One	Last 4 digits of account number		¢E2
Capital One Nonpriority Creditor's Name PO Box 6492	When was the debt incurred?		\$53
Carol Stream, IL 60197-6492	When was the dest mounted.		
Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing		
Yes	Other. Specify Credit card	purchases	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 11

Debto	or 1 Brandi Monique Daniels		Case number (if know) 17-52679	
4.5	City of Akron	Last 4 digits of account number	4301	\$782.00
	Nonpriority Creditor's Name Public Utilities Bureau 146 S High Street Rm 211	When was the debt incurred?		· · · · · · · · · · · · · · · · · · ·
	Akron, OH 44308-1894 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Utility Expe	ense	
4.6	Clerk of Courts	Last 4 digits of account number	1426	\$145.00
	Nonpriority Creditor's Name Summit County Court of Common	When was the debt incurred?		
	Pleas 205 South High Street Domestic Relations Division Akron, OH 44308			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other Specify Unpaid Cou	urt costs	
4.7	Compaign Bonk Now York 9 Co	Lock 4 divite of account number	4640	¢4.462.00
4.7	Comenity Bank - New York & Co. Nonpriority Creditor's Name	Last 4 digits of account number	4640	\$1,162.00
	P.O. Box 659728 San Antonio, TX 78265-9728	When was the debt incurred?	Opened 03/15 Last Active 9/08/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Charge Acc	count	

Schedule E/F: Creditors Who Have Unsecured Claims

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1 Brandi Monique Daniels		Case number (if know) 17-52679	
Digestive Disease Co Akron	Last 4 digits of account number	9714	\$36.00
Nonpriority Creditor's Name c/o First Federal Credit Control 24700 Chagrin Blvd Suite 205	When was the debt incurred?	Opened 09/16	
Beachwood, OH 44122-5662 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.	
At least one of the debtors and another	Student loans	d Claim.	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	and a standard and a	
■ No	Debts to pension or profit-sharir		
Yes	Other. Specify Medical ex	pense 	
Dominion East Ohio Gas Company 9/16	Last 4 digits of account number	0819	\$616.00
Nonpriority Creditor's Name ATTN: Bankruptcy PO Box 5759	When was the debt incurred?		
ileveland, OH 44101-5759 umber Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	Student loans	d Glaini.	
☐ Check if this claim is for a community debt s the claim subject to offset?	_	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharir	o plans, and other similar debts	
□ Yes	■ Other. Specify Utility Expe		
	· , ,		
Donald L. Stone D.P.M. Nonpriority Creditor's Name	Last 4 digits of account number	4556	\$133.00
8090 West Market Street Suite 112	When was the debt incurred?	9/24/2016	
Akron, OH 44333-4230 Jumber Street City State Zlp Code Vho incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharir	g plans, and other similar debts	
□ Yes	■ Other. Specify Medical Se	- '	
□ 163	Utner. Specify Wiedical Se	1 11000	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor	1 Brandi Monique Daniels		Case number (if know) 17-52679	
4.1	Eagle Loan Co Of Ohio	Last 4 digits of account number		\$3,933.00
<u>·</u>	Nonpriority Creditor's Name 6817 Pearl Road Middleburgh Heights, OH 44130	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	g plans, and other similar debts	
	□ Yes	Other. Specify Installment		
	l les	Other. Specify		
4.1	Edsouth/glelsi Nonpriority Creditor's Name	Last 4 digits of account number	7051	\$28,749.00
	Po Box 7860 Madison, WI 53707	When was the debt incurred?	Opened 10/96 Last Active 9/30/17	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	 Obligations arising out of a separeport as priority claims 	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	☐ Other. Specify		
		Educationa	ıl	
4.1	First Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number	4049	\$465.00
	601 S Minnesota Ave Sioux Falls, SD 57104	When was the debt incurred?	Opened 08/15 Last Active 2/25/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debt	or 1 Brandi Monique Daniels		Case number (if know) 17-52679	
4.1 4	Key Education Resource	Last 4 digits of account number	7220	\$18,615.00
	Nonpriority Creditor's Name P.o. Box 7860 Madison, WI 53707	When was the debt incurred?	Opened 12/03 Last Active 10/22/12	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	☐ Other. SpecifyEducationa	I	
4.1	Maxlend Cash Advance	Last 4 digits of account number		\$400.00
5	Nonpriority Creditor's Name P.O. Box 639	Last 4 digits of account number When was the debt incurred?		Ψ+00.00
	Parshall, ND 58770 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt		d claim: ration agreement or divorce that you did not	
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Cash Adva	nce	
4.1 6	Merrick Bank Corp	Last 4 digits of account number	4462	\$487.00
	Nonpriority Creditor's Name Po Box 9201 Old Bethpage, NY 11804	When was the debt incurred?	Opened 11/15 Last Active 4/09/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin		
	☐ Yes	Other. Specify Credit Card	<u> </u>	

Schedule E/F: Creditors Who Have Unsecured Claims

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Best Case Bankruptcy

1 Brandi Monique Daniels		Case number (if know)	17-52679	
Mid America Bk/total C Nonpriority Creditor's Name	Last 4 digits of account number	8833		Unknown
Nonpriority Creditor's Name	_			
5109 S Broadband Ln Sioux Falls, SD 57108	When was the debt incurred?	Opened 06/16 Las 1/27/17	t Active	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts	
Yes	■ Other. Specify Credit Card	d		
Ohio Edison	Last 4 digits of account number	7622		\$530.00
Nonpriority Creditor's Name Attn: Bankruptcy Department 76 South Main Street	When was the debt incurred?			
Akron, OH 44308 Number Street City State Zlp Code	As of the date you file, the claim	is: Chack all that apply		
Who incurred the debt? Check one.	As of the date you me, the claim	is. Offect all that apply		
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts	
Yes	■ Other. Specify Utility Expe	ense		
PNC Bank	Last 4 digits of account number	6043		\$179.00
Nonpriority Creditor's Name				+
P.O. Box 747032 Pittsburgh, PA 15274-7032	When was the debt incurred?			
Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply		
Who incurred the debt? Check one.	_			
■ Debtor 1 only	Contingent			
Debtor 2 only	Unliquidated			
	☐ Disputed			
☐ Debtor 1 and Debtor 2 only	'	Later a		
	Type of NONPRIORITY unsecured	d claim:		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	Type of NONPRIORITY unsecured ☐ Student loans			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecured		that you did not	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce		

Schedule E/F: Creditors Who Have Unsecured Claims

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Santander Consumer USA Nonpriority Creditor's Name Attn: Bankruptcy Dept. P.O. Box 560284	Last 4 digits of account number 3817	\$9,781.00
Attn: Bankruptcy Dept.	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Deficiency balance on automobile loan	
Sprint	Last 4 digits of account number	\$900.00
Nonpriority Creditor's Name		
P.O. Box 4191 Carol Stream, IL 60197-4191	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Cell Phone	
Summa Physicians, Inc.	Last 4 digits of account number 2038	\$43.00
Nonpriority Creditor's Name P.O. Box 630092	When was the debt incurred? 7/08/17	
Cincinnati, OH 45263-0092 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	76 of the date you me, the stant lot officer all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical Services	

Schedule E/F: Creditors Who Have Unsecured Claims

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Support Services Respirator Nonpriority Creditor's Name	Last 4 digits of account number	<u>2997</u>	\$300.00
c/o First Federal Credit Control 24700 Chagrin Blvd Suite 205 Beachwood, OH 44122-5662	When was the debt incurred?	Opened 10/16	
Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin	• •	
Yes	■ Other. Specify Medical exp	pense	
T-Mobile	Last 4 digits of account number	7897	\$54.00
Nonpriority Creditor's Name c/o Enhanced Recovery Co LLC 8014 Bayberry Rd	When was the debt incurred?	Opened 01/14	
lacksonville, FL 32256-7412 lumber Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	☐ Student loans		
Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin	• •	
Yes	Other. Specify Celluylar te	lephone service	
US Department of Education		7577	\$8,945.00
/Glelsi* Nonpriority Creditor's Name	Last 4 digits of account number		ψ0,545.00
PO Box 7860 Madison, WI 53707-7860	When was the debt incurred?	Opened 08/05 Last Active 9/30/17	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	☐ Other. Specify		

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor '	1 Brandi Monique Daniels		Case number (if know)	17-52679	
4.2 6	Verizon Wireless	Last 4 digits of account number	0001		\$644.00
0	Nonpriority Creditor's Name	Last 4 digits of account number		-	***************************************
	P.O. Box 4002	When was the debt incurred?			
	Acworth, GA 30101-4002 Number Street City State Zlp Code	As of the date you file, the claim	is: Chack all that apply		
	Who incurred the debt? Check one.	As of the date you me, the olding	113. Oneok all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:		
	_	☐ Student loans			
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sep	paration agreement or divorce	that you did not	
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-shar	ing plans, and other similar de	ebts	
	Yes	■ Other. Specify Cellular To	elephone Expense		
Part 3:	List Others to Be Notified About a D	ebt That You Already Listed			
is tryin have n	is page only if you have others to be notified ng to collect from you for a debt you owe to s nore than one creditor for any of the debts th d for any debts in Parts 1 or 2, do not fill out	someone else, list the original creditor in nat you listed in Parts 1 or 2, list the add	in Parts 1 or 2, then list the	collection agency	here. Similarly, if you
	nd Address	On which entry in Part 1 or Part 2 did yo			
	Collection Services Inton Street	_	Part 1: Creditors with Prior	-	
	od, MA 02062		Part 2: Creditors with Nonp	priority Unsecured (Claims
	,	Last 4 digits of account number	9863		
Name ar	nd Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?		
	world Systems Inc.	Line 4.2 of (Check one):	Part 1: Creditors with Prior	ity Unsecured Clain	ns
802 E. Suite 2	Martintown Road	ı	Part 2: Creditors with Non	oriority Unsecured (Claims
	Augusta, SC 29841				
		Last 4 digits of account number	8537		
Name ar	nd Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?		
	partment of Education	Line <u>4.25</u> of (<i>Check one</i>):	Part 1: Creditors with Prior	ity Unsecured Clain	ns
/GLELS		I	Part 2: Creditors with None	priority Unsecured C	Claims
	of the United States Attorne . Stokes United States Court				
	est Superior Avenue, Suite				
400					
Clevela	and, OH 44113-1852	Last 4 digits of account number			
	nd Address partment of Education	On which entry in Part 1 or Part 2 did yo Line 4.25 of (Check one):	_		
/GLEL			Part 1: Creditors with Prior	-	
	Loan Servicing CEnter	•	Part 2: Creditors with Nonp	oriority Unsecured C	ciaims
PO Bo					
Green	ville, TX 75403	Last 4 digits of account number			
N.I.	10.11		P. (4)		
	nd Address partment of Education	On which entry in Part 1 or Part 2 did yo Line 4.25 of (Check one):	u list the original creditor? Part 1: Creditors with Prior	ity Unsecured Clain	ns
/GLES		· · · · · · · · · · · · · · · · · · ·	Part 2: Creditors with Non	•	
Main J 10th &	ey General of the United Stat ustice Building Constitution Avenue, N.W. ngton, DC 20530		— Fait 2. Ofediois will Non	onomy onsecured C	viainis
wasni					

Part 4: Add the Amounts for Each Type of Unsecured Claim

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Official Form 106 E/F

Best Case Bankruptcy

Schedule E/F: Creditors Who Have Unsecured Claims

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total				-	
claims rom Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	Ψ ——	0.00
	ou.	Calci. Add all other priority dissecured dains. Write that amount here.	ou.	Φ	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	56,309.00
Total claims					
om Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	22,313.00
		nore.		· —	

Fill in this infor	mation to identify your	case:		
Debtor 1	Brandi Monique I	Daniels		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
Case number	17-52679			
(if known)				Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the , Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.3	Oity		Otato	Zii Oodc	
2.0	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Fill in thi	s information to identify your	case:			
Debtor 1	Brandi Monique I				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, f	iling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	NORTHERN DISTRICT	r of ohio		
Case nur	nber 17-52679				
(if known)				☐ Check if thi amended fi	
Codebtor people ar	e filing together, both are equ	re also liable for any del	plying correct informat	s complete and accurate as possible. If two ion. If more space is needed, copy the Addi o this page. On the top of any Additional Pa	itional Page,
our nam	e and case number (if known) you have any codebtors? (If). Answer every question	1.		
		you are ming a joint odoc,	do not not chiler spouse	as a coastor.	
■ No					
$\Box \lor \iota$	26				
□ Y€					
2. W				y? (Community property states and territories ngton, and Wisconsin.)	include
2. W Arizo	ithin the last 8 years, have you na, California, Idaho, Louisiana				include
2. W Arizo	ithin the last 8 years, have you na, California, Idaho, Louisiana b. Go to line 3.	, Nevada, New Mexico, Pเ	uerto Rico, Texas, Wash		include
2. W Arizo	ithin the last 8 years, have you na, California, Idaho, Louisiana	, Nevada, New Mexico, Pเ	uerto Rico, Texas, Wash		include
2. Wi Arizo	ithin the last 8 years, have you on a, California, Idaho, Louisiana o. Go to line 3. es. Did your spouse, former spoudumn 1, list all of your codebte 2 again as a codebtor only is	, Nevada, New Mexico, Pu use, or legal equivalent liv tors. Do not include your if that person is a guarar	e with you at the time? r spouse as a codebtor		erson shown ıle D (Official
2. Wi Arizo	ithin the last 8 years, have you on a, California, Idaho, Louisiana o. Go to line 3. es. Did your spouse, former spoulumn 1, list all of your codebt as 2 again as a codebtor only in 106D), Schedule E/F (Official	, Nevada, New Mexico, Pu use, or legal equivalent liv tors. Do not include your if that person is a guarar I Form 106E/F), or Scheo	e with you at the time? r spouse as a codebtor	ngton, and Wisconsin.) if your spouse is filing with you. List the posure you have listed the creditor on Schedu	erson shown ıle D (Official edule G to fill
2. Wi Arizo	ithin the last 8 years, have you ma, California, Idaho, Louisiana o. Go to line 3. es. Did your spouse, former spoulumn 1, list all of your codebt in 106D), Schedule E/F (Official Column 2.	, Nevada, New Mexico, Pu use, or legal equivalent liv tors. Do not include your if that person is a guarar I Form 106E/F), or Scheo	e with you at the time? r spouse as a codebtor	if your spouse is filing with you. List the posure you have listed the creditor on Schedu 6G). Use Schedule D, Schedule E/F, or Sch	erson shown ıle D (Official edule G to fill
2. Wind Arizon Arizon No. In Co. in lin Form out Co.	ithin the last 8 years, have you ma, California, Idaho, Louisiana o. Go to line 3. es. Did your spouse, former spoulumn 1, list all of your codebt in 106D), Schedule E/F (Official Column 2.	, Nevada, New Mexico, Pu use, or legal equivalent liv tors. Do not include your if that person is a guarar I Form 106E/F), or Scheo	e with you at the time? r spouse as a codebtor	if your spouse is filing with you. List the posure you have listed the creditor on Schedu 6G). Use Schedule D, Schedule E/F, or Sch Column 2: The creditor to whom you ov Check all schedules that apply: Schedule D, line Schedule E/F, line	erson shown ıle D (Official edule G to fill
2. Wind Arizon Arizon No. In Co. in lin Form out Co.	ithin the last 8 years, have you ona, California, Idaho, Louisiana o. Go to line 3. es. Did your spouse, former spouse, former spouse 2 again as a codebtor only in 106D), Schedule E/F (Official Column 2. Column 1: Your codebtor Name, Number, Street, City, State and Z	, Nevada, New Mexico, Pu use, or legal equivalent liv tors. Do not include your if that person is a guarar I Form 106E/F), or Scheo	e with you at the time? r spouse as a codebtor	if your spouse is filing with you. List the posure you have listed the creditor on Schedu 6G). Use Schedule D, Schedule E/F, or Sch	erson shown ıle D (Official edule G to fill
2. Wind Arizon Arizon No. In Co. in lin Form out Co.	ithin the last 8 years, have you ona, California, Idaho, Louisiana o. Go to line 3. es. Did your spouse, former spoudiumn 1, list all of your codebt the 2 again as a codebtor only in 106D), Schedule E/F (Official Column 2. Column 1: Your codebtor Name, Number, Street, City, State and Z	, Nevada, New Mexico, Pu use, or legal equivalent liv tors. Do not include your if that person is a guarar I Form 106E/F), or Scheo	e with you at the time? r spouse as a codebtor	if your spouse is filing with you. List the posure you have listed the creditor on Schedu 6G). Use Schedule D, Schedule E/F, or Sch Column 2: The creditor to whom you ov Check all schedules that apply: Schedule D, line Schedule E/F, line	erson shown ıle D (Official edule G to fill
2. Wind Arizon Arizon No Ye 3. In Conin line Form out (ithin the last 8 years, have you ma, California, Idaho, Louisiana o. Go to line 3. es. Did your spouse, former spoulumn 1, list all of your codebute 2 again as a codebtor only in 106D), Schedule E/F (Official Column 2. Column 1: Your codebtor Name, Number, Street, City, State and Z	, Nevada, New Mexico, Puuse, or legal equivalent livers. Do not include your if that person is a guarar I Form 106E/F), or Scheoo	e with you at the time? r spouse as a codebtor ntor or cosigner. Make	if your spouse is filing with you. List the posure you have listed the creditor on Schedu 6G). Use Schedule D, Schedule E/F, or Sch Column 2: The creditor to whom you ov Check all schedules that apply: Schedule D, line Schedule E/F, line	erson shown ıle D (Official edule G to fill
2. Wind Arizon Arizon No. In Co. in lin Form out Co.	ithin the last 8 years, have you ma, California, Idaho, Louisiana o. Go to line 3. es. Did your spouse, former spoulumn 1, list all of your codebute 2 again as a codebtor only in 106D), Schedule E/F (Official Column 2. Column 1: Your codebtor Name, Number, Street, City, State and Z	, Nevada, New Mexico, Puuse, or legal equivalent livers. Do not include your if that person is a guarar I Form 106E/F), or Scheoo	e with you at the time? r spouse as a codebtor ntor or cosigner. Make	if your spouse is filing with you. List the pesure you have listed the creditor on Schedu 6G). Use Schedule D, Schedule E/F, or Sch Column 2: The creditor to whom you on Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line	erson shown ıle D (Official edule G to fill

Fill	in this information to identify your c	ase:								
Deb	otor 1 Brandi Mon	ique Daniels								
	otor 2									
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF OHIO							
	se number 17-52679						Check if this is	S:		
(If kn	own)						☐ An amend ☐ A supplem 13 income	nent showin	g postpetition ollowing date:	
0	fficial Form 106I						MM / DD/	YYYY		
S	chedule I: Your Inc	ome								12/15
sup _l spo atta	is complete and accurate as posi- plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and yo	our spouse clude info	is li rmat	ving ion	with you, incapout space with with your space with with the space with the with the space with the with the space with the with t	lude inforrouse. If me	nation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1				Debtor	2 or non-fi	ling spouse	
	If you have more than one job,	Employment status	■ Employed			☐ Emp	☐ Employed			
	attach a separate page with information about additional		☐ Not employed			☐ Not employed				
	employers.	Occupation	Application I	Processo	r					
	Include part-time, seasonal, or self-employed work.	Employer's name	Third Federa	I Savings	& L	.oaı	<u> </u>			
	Occupation may include student or homemaker, if it applies.	Employer's address	7007 Broadw Cleveland, O		ıe					
		How long employed t	here? _5 ye	ars						
Par	t 2: Give Details About Mor	nthly Income								
spou If yo	mate monthly income as of the duse unless you are separated. u or your non-filing spouse have mean space, attach a separate sheet to	ore than one employer, co	,	·	·	loye		on on the li	·	· ·
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	<u> </u>	3,022.50	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$;	0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	5	3,022.50	\$	N/A	

other friends or relatives.

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.

Specify:

11. +\$ 0.00

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.

Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies

Combined monthly income

13. Do you expect an increase or decrease within the year after you file this form?

No.

Yes. Explain:

Fill	in this information to identify your case:				
Deb	otor 1 Brandi Monique Daniels		Che	ck if this is:	
D-1-	otor 2			An amended filing	
	ouse, if filing)			A supplement show 13 expenses as of	ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO			MM / DD / YYYY	
	· ,			WINT DD / TTTT	
1	nown) 17-52679				
Of	fficial Form 106J				
	chedule J: Your Expenses				12/15
info	as complete and accurate as possible. If two married people are filing ormation. If more space is needed, attach another sheet to this form. C mber (if known). Answer every question.				
Par					
1.	Is this a joint case?				
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Sep	parate Household of	Deb	otor 2.	
2.	Do you have dependents? \square No				
		endent's relationship or 1 or Debtor 2	to	Dependent's age	Does dependent live with you?
	Do not state the		Т		□ No
	dependents names. Sor	l		15	■ Yes
	Dai	ighter		22	□ No ■ Yes
		9			■ res □ No
					☐ Yes
					□ No
3.	Do your expenses include				☐ Yes
Э.	expenses of people other than				
	yourself and your dependents?				
Par					
exp	imate your expenses as of your bankruptcy filing date unless you are senses as of a date after the bankruptcy is filed. If this is a supplement plicable date.				
Incl	lude expenses paid for with non-cash government assistance if you k	now			
	value of such assistance and have included it on Schedule I: Your Inc ficial Form 106I.)	come		Your expe	enses
(0	1001.7				
4.	The rental or home ownership expenses for your residence. Include payments and any rent for the ground or lot.	first mortgage	4. \$	\$	0.00
	If not included in line 4:				
	4a. Real estate taxes	4	a. S	\$	261.00
	4b. Property, homeowner's, or renter's insurance		b. S	·	0.00
	4c. Home maintenance, repair, and upkeep expenses		c. \$	·	0.00
5	4d. Homeowner's association or condominium dues		d. \$	·	0.00
5.	Additional mortgage payments for your residence, such as home equ	ity ioans	o. :	Φ	0.00

Debtor 1	Brandi Monique Daniels	Case num	ber (if known)	17-52679
6. Utili 6a.	ties: Electricity, heat, natural gas	6a.	\$	175.00
6b.	Water, sewer, garbage collection	6b.		50.17
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	270.00
6d.	Other. Specify:	6d.	\$	0.00
	d and housekeeping supplies	0d. 7.	\$	
			· —	499.00
	dcare and children's education costs	8.	\$	90.00
	hing, laundry, and dry cleaning	9.	\$	65.00
	sonal care products and services	10.	\$	50.00
	ical and dental expenses	11.	\$	30.00
	nsportation. Include gas, maintenance, bus or train fare.	12.	\$	100.00
	not include car payments.	13.		
	ertainment, clubs, recreation, newspapers, magazines, and books		\$	0.00
	ritable contributions and religious donations	14.	\$	0.00
i. Insu				
	not include insurance deducted from your pay or included in lines 4 or 20. Life insurance	15a.	¢	0.00
			·	
	Health insurance	15b.	·	0.00
	Vehicle insurance	15c.	·	57.00
	Other insurance. Specify:	15d.	\$	0.00
_	es. Do not include taxes deducted from your pay or included in lines 4 or 20.		Φ.	
Spe		16.	\$	0.00
	allment or lease payments:	47-	Φ.	2.22
	Car payments for Vehicle 1	17a.	·	0.00
	Car payments for Vehicle 2	17b.	\$	0.00
	Other. Specify:	17c.		0.00
	Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report as	i 18.	\$	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	10.	\$	
Spe	er payments you make to support others who do not live with you.	19.	Φ	0.00
	er real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> e		our Income	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
			· —	
	Maintenance, repair, and upkeep expenses	20d.	·	0.00
	Homeowner's association or condominium dues	20e.		0.00
. Oth	er: Specify:	21.	+\$	0.00
2. Calc	culate your monthly expenses			
	Add lines 4 through 21.		\$	1,647.17
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	1,977111
			;	4.647.47
22C.	Add line 22a and 22b. The result is your monthly expenses.		\$	1,647.17
3. Calo	culate your monthly net income.		L	
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,312.17
	Copy your monthly expenses from line 22c above.	23b.	· -	1,647.17
		_00.	Ť	1,077.17
23c.	Subtract your monthly expenses from your monthly income.			
	The result is your <i>monthly net income</i> .	23c.	\$	665.00
	you expect an increase or decrease in your expenses within the year after you			
	example, do you expect to finish paying for your car loan within the year or do you expect you fication to the terms of your mortgage?	r mortgage	payment to incre	ease or decrease because of a
□ Y	res. Explain here:			

Fill in this inform	nation to identify your	case:		
Debtor 1	Brandi Monique I			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
Case number 1	17-52679			
(if known)				☐ Check if this is an
				amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below								
Di	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?								
	No								
	Yes. Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)					
tha	der penalty of perjury, I declare that I have read the summary a t they are true and correct. /s/ Brandi Monique Daniels	and s	chedules filed with thi	is declaration and					
	Brandi Monique Daniels Signature of Debtor 1		Signature of Debtor 2						
	Date November 4th, 2017		Date						

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill in	this inform	nation to identify you	r case:			
Debto	r 1	Brandi Monique	Daniels			
Dobto	. 0	First Name	Middle Name	Last Name		
Debto (Spouse	if, filing)	First Name	Middle Name	Last Name		
United	d States Bar	nkruptcy Court for the:	NORTHERN DISTRICT C	OF OHIO		
Case	number 1	7-52679				
(if know	n)				_	Check if this is an
					a	mended filing
Stat Be as o	ement	nd accurate as possiore space is needed,	attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for sup	
numbe). Answer every que				
Part 1	Give D	etails About Your Ma	arital Status and Where You	Lived Before		
1. W	hat is your	current marital statu	ıs?			
	Married					
	Not mari	ried				
2. D	uring the la	ıst 3 years, have you	lived anywhere other than	where you live now?		
	No Yes. List	t all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
D	Debtor 1 Pri	or Address:	Dates Debtor 1	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. W	ithin the la	st 8 vears. did vou ev		ıal equivalent in a commun	ity property state or territory	
					co, Texas, Washington and W	
	No					
	Yes. Ma	ke sure you fill out Scl	hedule H: Your Codebtors (Of	ficial Form 106H).		
Part 2	Explair	n the Sources of You	r Income			
Fi	II in the tota	I amount of income yo	nployment or from operating users and a have income that you received from all jobs and a have income that you received.	all businesses, including part-		ndar years?
Г] No					
	•	in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$30,225.00	☐ Wages, commissions, bonuses, tips	
			□ Operating a husiness		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

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Best Case Bankruptcy

				Debtor 1			Debtor 2		
				Sources of income Check all that apply.		income deductions and ons)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	last caler nuary 1 to	dar year: December 3	31, 2016)	■ Wages, commissions, bonuses, tips	•		☐ Wages, combonuses, tips	ımissions,	
				☐ Operating a business			☐ Operating a	business	
		dar year bef December 3		■ Wages, commissions, bonuses, tips		\$31,719.00	☐ Wages, combonuses, tips	ımissions,	
				☐ Operating a business			☐ Operating a	business	
5.	Include include include and other winnings. List each and the lis	come regard public benef If you are fili	less of wheth it payments; ng a joint cas ne gross inco	e during this year or the two er that income is taxable. Exa pensions; rental income; inter e and you have income that y me from each source separat	amples of crest; divide you receive	other income are ends; money colle ed together, list it	alimony; child supp cted from lawsuits; only once under D	royalties; an ebtor 1.	
				Debtor 1			Debtor 2		
				Sources of income Describe below.	each s	deductions and	Sources of inc Describe below		Gross income (before deductions and exclusions)
Par	t 3: Lis	t Certain Pa	yments You	Made Before You Filed for I	Bankrupto	с у			
6.	□ No.	Neither De individual puring the No. Yes	ebtor 1 nor D primarily for a 90 days befo Go to line 7 List below e paid that cre not include o adjustment	s debts primarily consumer ebtor 2 has primarily consupersonal, family, or household re you filed for bankruptcy, distance creditor to whom you paireditor. Do not include payment payments to an attorney for the on 4/01/19 and every 3 years rooth have primarily consu	umer debt Id purpose id you pay id a total or his for dom his bankru s after that	any creditor a total f \$6,425* or more lestic support oblitoptcy case. If or cases filed or	al of \$6,425* or mo in one or more pa gations, such as cl	re? yments and t nild support a	he total amount you and alimony. Also, do
		_	·	re you filed for bankruptcy, di	id you pay	any creditor a tota	al of \$600 or more	,	
		■ No. □ Yes	include pay	. each creditor to whom you pai ments for domestic support of this bankruptcy case.					
	Creditor	's Name and	l Address	Dates of payme	ent	Total amount paid	Amount you still owe	Was this	payment for

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

Case number (if known)

17-52679

Official Form 107

Debtor 1

Brandi Monique Daniels

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

Der	Dianui Wonique Danieis			Case Hullibel	(II KIIOWII) 17-32079	
14.	Within 2 years before you filed for bank	ruptcy,	did you give any gifts or contribution	ns with a tota	al value of more than	\$600 to any charity?
	No					
	☐ Yes. Fill in the details for each gift or	contribu	tion.			
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co		Describe what you contributed		Dates you contributed	Value
Dor	<u> </u>	uej				
rai	t 6: List Certain Losses					
5.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?					
	■ No					
	☐ Yes. Fill in the details.					
	Describe the property you lost and	Descr	Describe any insurance coverage for the loss		Date of your	Value of property
	how the loss occurred	the amount that insurance has paid. List pending nee claims on line 33 of Schedule A/B: Property.		loss	lost	
			inde dialing on line de di conedate 772.	rroporty.		
Par	t 7: List Certain Payments or Transfe	rs				
16.	consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details.					
	Person Who Was Paid		Description and value of any prop	ortv	Date payment	Amount of
	Address Email or website address Person Who Made the Payment, if Not You		Description and value of any property transferred		Date payment or transfer was made	payment
	KNEVEL LAW CO. L.P.A. 5250 Transportation Blvd #201 Garfield Heights, OH 44125 Garfield Heights, OH 44125 mknevel@knevellaw.com		Attorney Fees		10/30/17	\$800.00
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes Fill in the details					
	- 100.1 iii iii tilo dotallo.		Description and only of any	4	D-1	A
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No					
	Yes. Fill in the details.					_
	Person Who Received Transfer Address		Description and value of property transferred		any property or s received or debts	Date transfer was made
	Person's relationship to you			paid iii e)	Condinge	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

19.	9. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)					
	■ No □ Yes. Fill in the details.					
	Name of trust	Description and v	alue of the pro	operty trans	sferred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Instr	uments, Safe Deposi	t Boxes, and S	Storage Unit	s	
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No	other financial accou	nts; certificate	s of deposi		
	Yes. Fill in the details.					
		ast 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy, a	any safe de _l	posit box or other depo	sitory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit or	place other than your	home within	1 year befo	re you filed for bankrup	tcy?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or it to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control fo	r Someone Else				
23.	Do you hold or control any property that some for someone.	eone else owns? Incl	ude any prope	erty you bor	rowed from, are storing	for, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value
Par	t 10: Give Details About Environmental Inform	mation				
For	the purpose of Part 10, the following definition	s apply:				
	Environmental law means any federal, state, of toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surface	e water, groun			
	Site means any location, facility, or property a to own, operate, or utilize it, including disposa	-	environmental	law, wheth	er you now own, operat	te, or utilize it or used
	Hazardous material means anything an enviro hazardous material, pollutant, contaminant, or		as a hazardou	s waste, ha	zardous substance, tox	ic substance,
Rep	ort all notices, releases, and proceedings that	you know about, rega	ardless of whe	en they occu	urred.	

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

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24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?					
	■ No					
	Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
25. Have you notified any governmental unit of any release of hazardous material?						
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or admi	nistrative proceeding under any envir	onmental law? Include settlements	and orders.		
	■ No					
	Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Por	44. Cive Details About Your Business or C	,				
Fai	11: Give Details About Your Business or Co	offiections to Any Business				
27.	Within 4 years before you filed for bankruptcy	y, did you own a business or have any	y of the following connections to any	/ business?		
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity,	either full-time or part-time			
	☐ A member of a limited liability compa	ny (LLC) or limited liability partnershi	p (LLP)			
	☐ A partner in a partnership					
	☐ An officer, director, or managing exec	cutive of a corporation				
	☐ An owner of at least 5% of the voting	or equity securities of a corporation				
	■ No. None of the above applies. Go to Pa	rt 12.				
	☐ Yes. Check all that apply above and fill in	n the details below for each business.				
	Business Name Address	Describe the nature of the business	Employer Identification numbe Do not include Social Security			
		Name of accountant or bookkeeper	Dates business existed	number of trin.		
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.						
	■ No					
	Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued				
	(

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

Debtor	Brandi Monique Daniels		Case number (if known)	17-52679
Part 12	Sign Below			
are true with a k 18 U.S.	ead the answers on this Statement of and correct. I understand that making ankruptcy case can result in fines upon the control of the control	ng a false statement, concealing pro	perty, or obtaining money or	
	andi Monique Daniels	Cimpature of Dahton 2		
	li Monique Daniels ure of Debtor 1	Signature of Debtor 2		
Date	November 4th, 2017	Date		
Did you	ı attach additional pages to Your Sta	tement of Financial Affairs for Indivi	duals Filing for Bankruptcy (Official Form 107)?
■ No				·
☐ Yes				
Did you	ı pay or agree to pay someone who is	s not an attorney to help you fill out	bankruptcy forms?	

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

■ No

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 7

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Fill in this inform	Fill in this information to identify your case:					
Debtor 1	Brandi Monique Daniels					
Debtor 2 (Spouse, if filing)						
United States E	Bankruptcy Court for the: Northern District of Ohio					
Case number (if known)	17-52679					

Check as directed in lines 17 and 21:							
	According to the calculations required by this Statement:						
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

P	art	1: Calculate Your Average Monthly Income							
	1.	What is your marital and filing status? Check one of	nly.						
		■ Not married. Fill out Column A, lines 2-11.							
		☐ Married. Fill out both Columns A and B, lines 2-11.							
	10 th	I in the average monthly income that you received from al 1(10A). For example, if you are filing on September 15, the 6-26 months, add the income for all 6 months and divide the total buses own the same rental property, put the income from that	month per al by 6. Fil	iod would I in the re	be March 1 throusult. Do not include	ւgh Auվ de any i	gust 31. If the amo	ount of your monthly incom ore than once. For examp	ne varied during le, if both
						Colur Debte		Column B Debtor 2 or non-filing spouse	
	2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and co	mmissio	ons (before all	\$	3,022.00	\$	
	3.	Alimony and maintenance payments. Do not includ Column B is filled in.	e payme	nts from	a spouse if	\$	0.00	\$	
	4.	All amounts from any source which are regularly p of you or your dependents, including child suppor from an unmarried partner, members of your househo and roommates. Do not include payments from a spot you listed on line 3.	t. Include ld, your o	e regulai depende	r contributions nts, parents,	\$	0.00	\$	
	5.	Net income from operating a business, profession, or farm	Debtor	1					
		Gross receipts (before all deductions)	\$	0.00					
		Ordinary and necessary operating expenses	-\$	0.00					
		Net monthly income from a business, profession, or fa	rm \$	0.00	Copy here ->	\$	0.00	\$	
	6.	Net income from rental and other real property	Debtor						
		Gross receipts (before all deductions)	\$	0.00					
		Ordinary and necessary operating expenses	-\$	0.00					
		Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

page 1

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Best Case Bankruptcy

	randi Monique Daniels			Case num	ber (<i>if known</i>	17-5267	9	
				Column A		Column E Debtor 2 non-filing	or	
Interes	t, dividends, and royalties			\$	0.00	\$	-	
	loyment compensation			\$	0.00	\$		_
	enter the amount if you contend that the cial Security Act. Instead, list it here:	ne amount received was	a benefit unde	er				_
Fory		\$	0.00					
	our spouse							
	n or retirement income. Do not include under the Social Security Act.	de any amount received	that was a	\$	0.00	\$		_
Do not receive	e from all other sources not listed at include any benefits received under the d as a victim of a war crime, a crime ag ic terrorism. If necessary, list other soulow.	e Social Security Act or page gainst humanity, or interi	payments national or					
				\$	0.00	_ \$		_
				\$	0.00			=
	Total amounts from separate pages,	if any.	+	+ \$	0.00	_ \$		_
	ate your total average monthly incor olumn. Then add the total for Column A			3,022.00	+ \$			3,022.00 Total average monthly income
2.	Determine How to Measure Your De	ductions from Income						
. Сору у	Determine How to Measure Your Deour total average monthly income from the the marital adjustment. Check on	rom line 11.					\$	3,022.00
. Copy y	our total average monthly income fr	rom line 11.					\$	3,022.00
. Copy y . Calcula ■ Yo	our total average monthly income frate the marital adjustment. Check on	rom line 11. e:					\$	3,022.00
Copy y Calculi Y Y Y Y F i de	our total average monthly income frate the marital adjustment. Check on our are not married. Fill in 0 below. Our are married and your spouse is filing our are married and your spouse is not linguished in the amount of the income listed in expendents, such as payment of the spoelow, specify the basis for excluding the ligustments on a separate page.	g with you. Fill in 0 below filing with you. line 11, Column B, that wouse's tax liability or the sis income and the amour	<i>r.</i> was NOT regu spouse's supp	larly paid for ort of somec	the hous	ehold expense than you or yo	es of you our depen	or your dents.
Copy y Calculi Y Y Y Y F i de	our total average monthly income frate the marital adjustment. Check on our are not married. Fill in 0 below. Our are married and your spouse is filing our are married and your spouse is not if in the amount of the income listed in opendents, such as payment of the spoelow, specify the basis for excluding this	g with you. Fill in 0 below filing with you. line 11, Column B, that wouse's tax liability or the sis income and the amour	vas NOT regu spouse's supp nt of income d	larly paid for ort of somec	the hous	ehold expense than you or yo	es of you our depen	or your dents.
Copy y Calculi Y Y Y Y F i de	our total average monthly income frate the marital adjustment. Check on our are not married. Fill in 0 below. Our are married and your spouse is filing our are married and your spouse is not linguished in the amount of the income listed in expendents, such as payment of the spoelow, specify the basis for excluding the ligustments on a separate page.	g with you. Fill in 0 below filing with you. line 11, Column B, that wouse's tax liability or the sis income and the amour	<i>r.</i> was NOT regu spouse's supp	larly paid for ort of somec	the hous	ehold expense than you or yo	es of you our depen	or your dents.
Copy y Calculi Y Y Y Y F i de	our total average monthly income frate the marital adjustment. Check on our are not married. Fill in 0 below. Our are married and your spouse is filing our are married and your spouse is not linguished in the amount of the income listed in expendents, such as payment of the spoelow, specify the basis for excluding the ligustments on a separate page.	g with you. Fill in 0 below filing with you. line 11, Column B, that wouse's tax liability or the sis income and the amour	vas NOT regu spouse's supp nt of income d	larly paid for ort of somec	the hous	ehold expense than you or yo	es of you our depen	or your dents.
. Copy y . Calcula Yo Yo Yo Fi de	our total average monthly income frate the marital adjustment. Check on our are not married. Fill in 0 below. Our are married and your spouse is filing our are married and your spouse is not linguished in the amount of the income listed in expendents, such as payment of the spoelow, specify the basis for excluding the ligustments on a separate page.	g with you. Fill in 0 below filing with you. line 11, Column B, that wouse's tax liability or the s is income and the amoun	vas NOT regu spouse's supp nt of income do \$ \$	larly paid for ort of somed evoted to ea	the hous one other och purpos	ehold expense than you or yo	es of you our depen	or your dents.

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

15a. Copy line 14 here=>_____

15b. The result is your current monthly income for the year for this part of the form.

Multiply line 15a by 12 (the number of months in a year).

page 2

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Best Case Bankruptcy

x 12

36,264.00

Debtor	1	Braı	ndi Monique Daniels		Case number (if known)	17-52679		
16.	Calo	ulate	the median family income that applies to	you. Follow these ste	ps:			
	16a.	Fill ir	the state in which you live.	ОН				
	16b.	Fill ir	the number of people in your household.	3				
	16c.	Fill in	the median family income for your state and	size of household.			¢	69,058.00
		To fi	nd a list of applicable median income amounts uctions for this form. This list may also be ava	s, go online using the			Ψ	
17.	How	do t	he lines compare?					
	17a.		Line 15b is less than or equal to line 16c. 0 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N					
	17b.		Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14 a	ulation of Your Disp				
Part :	3:	Ca	Iculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)				
18.	Сор	y you	ır total average monthly income from line 1	l1.			6	3,022.00
19.	Ded cont	uct th end th	ne marital adjustment if it applies. If you are not calculating the commitment period under 1 income, copy the amount from line 13.	e married, your spous	e is not filing with you, and you			
	•		marital adjustment does not apply, fill in 0 on	line 19a.		-(6	0.00
			1			,		
	19b.	Subt	ract line 19a from line 18.				\$	3,022.00
20.	Calc	ulate	your current monthly income for the year.	. Follow these steps:				
			/ line 19b				\$	3,022.00
			ply by 12 (the number of months in a year).				X	12
:	20b.	The	result is your current monthly income for the y	ear for this part of the	e form		\$	36,264.00
:	20c.	Copy	the median family income for your state and	size of household fro	m line 16c		\$	69,058.00
:	21.	How	do the lines compare?					
			Line 20b is less than line 20c. Unless otherwiperiod is 3 years. Go to Part 4.	ise ordered by the cou	urt, on the top of page 1 of this f	orm, check b	ox 3, <i>T</i>	he commitment
			Line 20b is more than or equal to line 20c. Ur commitment period is 5 years. Go to Part 4.	nless otherwise order	ed by the court, on the top of pa	ge 1 of this f	orm, ch	eck box 4, The
Part -	4:	Sig	gn Below					
	By s	igning	g here, under penalty of perjury I declare that	the information on this	s statement and in any attachme	ents is true a	nd corre	ect.
Х	/s/	Brar	ndi Monique Daniels					
	Br	andi	Monique Daniels e of Debtor 1					

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

If you checked 17a, do NOT fill out or file Form 122C-2.

Date November 4th, 2017
MM / DD / YYYY

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7	7 :	Liquidation
\$2	245	filing fee
:	\$75	administrative fee
+	\$15	trustee surcharge
\$:	335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

page 3

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

page 4

United States Bankruptcy Court Northern District of Ohio

Debtor(s) Chapter Disclosure of Compensation of Attorney for the above name compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:	ed debtor(s) and that o me, for services rendered or to
1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above name compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to	ed debtor(s) and that o me, for services rendered or to ows: 3,063.00
compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to	o me, for services rendered or to ows: 3,063.00
be rendered on behalf of the debtor(s) in contemplation of of in connection with the bankruptcy case is as for	
For legal services, I have agreed to accept\$	800.00
Prior to the filing of this statement I have received \$	
Balance Due \$	2,263.00
2. The source of the compensation paid to me was:	
■ Debtor □ Other (specify):	
3. The source of compensation to be paid to me is:	
■ Debtor □ Other (specify):	
4. I have not agreed to share the above-disclosed compensation with any other person unless they are members.	ers and associates of my law firm.
☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members of copy of the agreement, together with a list of the names of the people sharing in the compensation is attacted.	
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy ca	se, including:
 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to fi b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearing. d. [Other provisions as needed] See written contract which sets forth terms and conditions of employment. Attorney not a part of the contract and is provided for informational purposes only. 	ings thereof;
6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:	
CERTIFICATION	
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for rethis bankruptcy proceeding.	presentation of the debtor(s) in
November 4th, 2017 /s/ Mark H. Knevel (0029285)	
Date Mark H. Knevel (0029285) Signature of Attorney	
KNEVEL LAW CO. L.P.A.	
5250 Transportation Blvd #201	
Garfield Heights, OH 44125	
Name of law firm	

United States Bankruptcy Court Northern District of Ohio

In re	Brandi Monique Daniels		Case No.	17-52679
		Debtor(s)	Chapter	13
	VERIFICAT	TION OF CREDITOR MA	TRIX	
The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.				
Date:	November 4th, 2017	/s/ Brandi Monique Daniels		
		Brandi Monique Daniels		
		Signature of Debtor		